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of determining the peri	, the petition , and the fee have od of extension and the correst	been filed is the da	ite of the response and	also the date for the	
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application in condition f	or allowance:	nas been consider	ed with the following el	fect, but it is not deemed	
sed amendments to the	e claim and /or specification will	not be entered and	f the final rejection star	nds because:	
ere is no convincing sho sented.	wing under 37 CFR 1.116(b) w	hy the proposed an	nendment is necessary	and was not earlier	
y raise new issues that	would require further considers	tion and/or search.	(See Note).		
y raise the issue of nev	w matter. (See Note).				
ey are not deemed to p peal.	lace the application in better for	rm for appeal by ma	aterially reducing or sin	nplifying the issues for	
ey present additional cla	alms without cancelling a corres	ponding number of	finally rejected claims.		
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Other

 $\hfill \square$ The proposed drawing correction $\hfill \square$ has $\hfill \square$ has not been approved by the examiner.

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definition of cancer vaccines.

Applicant states that it is very relevant that actual survival in human cancer patients, which is the end-measure of all other factors in cancer treatment, is quantitatively related to the concentration of anti-Recognin antibody. Applicant argues that one of the factors in using tumor associated antigens (TAAs) taught by Stevenson is the formation of antibodies which can lead to autoimmune reactions. Applicant states that this is not a problem with Recognin because the Recognins are not constituents of normal cells and therefore normal cells are not at risk in either active of passive treatment with Recognins or anti-Recognins. Applicant also states that Recognins have a natural immunity mechanism because anti-Recognins increase with age in normal healthy individuals as the risk for cancer increases and that anti-Recognins increase with age more strikingly and start earlier in healthy members of cancer high-risk families. Applicants state that Recognins satisfy the criteria set forth for cancer vaccines by the Bystryn reference in that 1.) Anti-Recognins are powerful cytotoxic agents against cancer cells and Recognins are able to induce a clinically effective immune response in humans and 2.) Recognins are expressed on the tumor to be treated where it can be seen by an interact with immune effector mechanisms. Applicant argues that because Recognins satisfy these requirements they meet the criteria for the

Applicant's arguments have been considered but are not deemed to be persuasive. Applicant states that Recognin satisfies the first criteria set forth by Bystryn for a tumor vaccine which is the ability to induce clinically effective immune responses in human. Following this criteria Applicant states that the anti-Recognins are powerful static and cytotoxic agents against cancer cells because they interact with Recognin. However, as stated in the previous Office Serial Number: 08/031,562

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action, the cytotoxicity of the anti-Recognin antibody to cancer cells in vitro is not sufficient to

demonstrate that the administration of the Recognin would result in the treatment of cancer

because the cytotoxicity measured in vitro cannot be extrapolated to the treatment of tumors in

vivo where other factors such as the anatomical location of the tumor, the tumor mass, and the

long tumor-host relationship make the in vivo system much more complex and unpredictable.

Applicant has stated that it is very relevant that actual survival in human cancer patients, which

is the end-measure of all other factors in cancer treatment, is quantitatively related to the

concentration of anti-Recognin antibody. However, it is maintained that the specification does

not teach that Recognin, when administered as a vaccine, prevents or treats clinical cancer. The

correlation of naturally occurring anti-Recognin antibodies in cancer patients with survival and

the in vitro cytotoxic activity of anti-Recognin is not sufficient to predict whether the

administration of Recognin will result in the treatment of clinical cancer because it has not been

determined whether anti-Recognin antibodies generated by the administration of Recognin are

capable of preventing or inhibiting tumor growth in vivo or whether antibody levels sufficient to

treat clinical cancer are generated by the administration of Recognin.

JKS

Julie Krsek-Staples, Ph.D.

February 14, 1995

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